

TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application No.	09/823,423
		Filing Date	March 29, 2001
		First Named Inventor	Michael S. Ripley
		Art Unit	2135
		Examiner Name	Thomas A. Gyorfi
Total Number of Pages in This Submission	16	Attorney Docket Number	42390P10855

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">Facsimile Cover Sheet</div>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Thomas M. Coester, Reg. No. 39,637 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	<i>Thomas Coester</i>
Date	July 20, 2005

CERTIFICATE OF MAILING/TRANSMISSION			
I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.			
Typed or printed name		Lillian E. Rodriguez	
Signature	<i>Lillian E. Rodriguez</i>	Date	July 20, 2006

Based on PTO/SB/21 (04-04) as modified by Blakely, Sokoloff, Taylor & Zafman (vtr) 05/09/2004.
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FEE TRANSMITTAL for FY 2005 <small>Patent fees are subject to annual revision.</small>		Complete if Known		
		Application Number	09/823,423	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		Filing Date	March 29, 2001	
		First Named Inventor	Michael S. Ripley	
		Examiner Name	Thomas A. Gyorfi	
		Art Unit	2135	
TOTAL AMOUNT OF PAYMENT (\$)		0.00	Attorney Docket No.	42390P10855

METHOD OF PAYMENT (check all that apply)

- ☐ Check ☐ Credit card ☐ Money Order ☒ None ☐ Other (please identify): _____
☒ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

- ☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or underpayment of fee(s) ☒ Credit any overpayments
 under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.

FEE CALCULATION

1. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
26	26	0	\$0.00
Independent Claims	3	0	\$0.00
Multiple Dependents			

Large Entity		Small Entity		Fee Description
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
1202	50	2202	25	Claims in excess of 20
1201	200	2201	100	Independent claims in excess of 3
1203	350	2203	180	Multiple Dependents claim, if not paid
1204	300	2204	150	*Reissue independent claims over original patent
1205	300	2205	150	*Reissue claims in excess of 20 and over original patent

SUBTOTAL (1) (0) 0.00

*For number previously paid, if greater, For Reissues, see below

2. ADDITIONAL FEES

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1031	120	2051	65	Surcharge - late filing fee or oath	
1032	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
2053	150	2053	150	Non-English specification	
1251	120	2251	60	Extension for reply within first month	
1252	450	2252	225	Extension for reply within second month	
1253	1,020	2253	510	Extension for reply within third month	
1254	1,680	2254	785	Extension for reply within fourth month	
1255	2,180	2255	1,080	Extension for reply within fifth month	
1401	500	2401	250	Notice of Appeal	
1402	500	2402	250	Filing a brief in support of an appeal	
1403	1,000	2403	500	Request for oral hearing	
1451	1,510	2451	1,510	Petition to institute a pseudo use proceeding	
1430	150	2430	150	Petitions to the Commissioner	
1607	50	1607	50	Processing fee under 37 CFR 1.17(a)	
1606	180	1606	180	Submission of Information Disclosure Sheet	
1608	780	1608	395	Filing a submission after final rejection (37 CFR § 1.129(d))	
1610	780	2610	385	For each additional invention to be examined (37 CFR § 1.129(b))	

Other fee (specify) _____

SUBTOTAL (2) (0)

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Thomas M. Coaster	Registration No. (Attorney/Agent)	39,637	Telephone	(310) 207-3800
Signature	<i>Thomas Coaster</i>	Date	07/20/05		

Based on PROSRM 7 (12/04) as modified by Blakely, Sokoloff, Taylor & Zafman (09/12/15/2004).
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RECEIVED
CENTRAL FAX CENTER**FEE TRANSMITTAL
for FY 2005***Patent fees are subject to annual revision.*☐ Applicant claims small entity status. See 37 CFR 1.27.**TOTAL AMOUNT OF PAYMENT (\$)** 0.00**Complete if Known**

Application Number 09/823,423
 Filing Date March 29, 2001
 First Named Inventor Michael S. Ripley
 Examiner Name Thomas A. Gyorfi
 Art Unit 2135
 Attorney Docket No. 42390P10855

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☒ None ☐ Other (please identify):
☒ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20. ☒ Credit any overpayments

FEE CALCULATION**1. EXTRA CLAIM FEES**

	Extra Claims	Fee from below	Fee Paid
Total Claims	28 - 26 = 0	50.00	\$0.00
Independent Claims	3 - 3 = 0	200.00	\$0.00
Multiple Dependent			
Large Entity	Small Entity	Fee Description	
Fee Code	Fee (\$)	Fee Code	Fee (\$)
1202	50	2202	25
1201	200	2201	100
1203	350	2203	180
1204	300	2204	160
1205	300	2205	150
SUBTOTAL (1)		(\$)	

*For number previously paid, if greater, For Reissues, see below

2. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	
Fee Code	Fee (\$)	Fee Code	Fee (\$)
1051	130	2051	85
1052	50	2052	25
2053	130	2053	130
1251	120	2251	80
1252	450	2252	225
1253	1,020	2253	510
1254	1,590	2254	795
1255	2,160	2255	1,080
1401	500	2401	250
1402	500	2402	250
1403	1,000	2403	500
1451	1,510	2451	1,510
1460	130	2460	130
1807	50	1807	50
1805	180	1805	180
1809	790	1809	395
1810	790	2810	385
SUBTOTAL (2)		(\$)	

Other fee (specify):

Fee Paid

SUBMITTED BY

Complete (if applicable)

Name (Print/Type) Thomas M. Coester Registration No. 39,637 Telephone (310) 207-3800
 Signature *Thomas Coester* Date 07/20/05

Based on PTO/BB/17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman v. 12/16/2004
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PATENT
Attorney's Docket No. 42P10855

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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In re Application of:)

Michael Ripley, et al.)

Application No. 09/823,423)

Filed: March 29, 2001)

For: Method and System for)
Providing Bus Encryption Based on)
Cryptographic Key Exchange)

Examiner: Thomas A. Gyorfi

Art Group: 2135

JUL 20 2005

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT AND RESPONSE TO FINAL OFFICE ACTION

In response to the Final Office Action mailed June 15, 2005, in connection with the above referenced patent application, Applicants respectfully request entry of the following amendments and requests reconsideration in view of the following remarks.